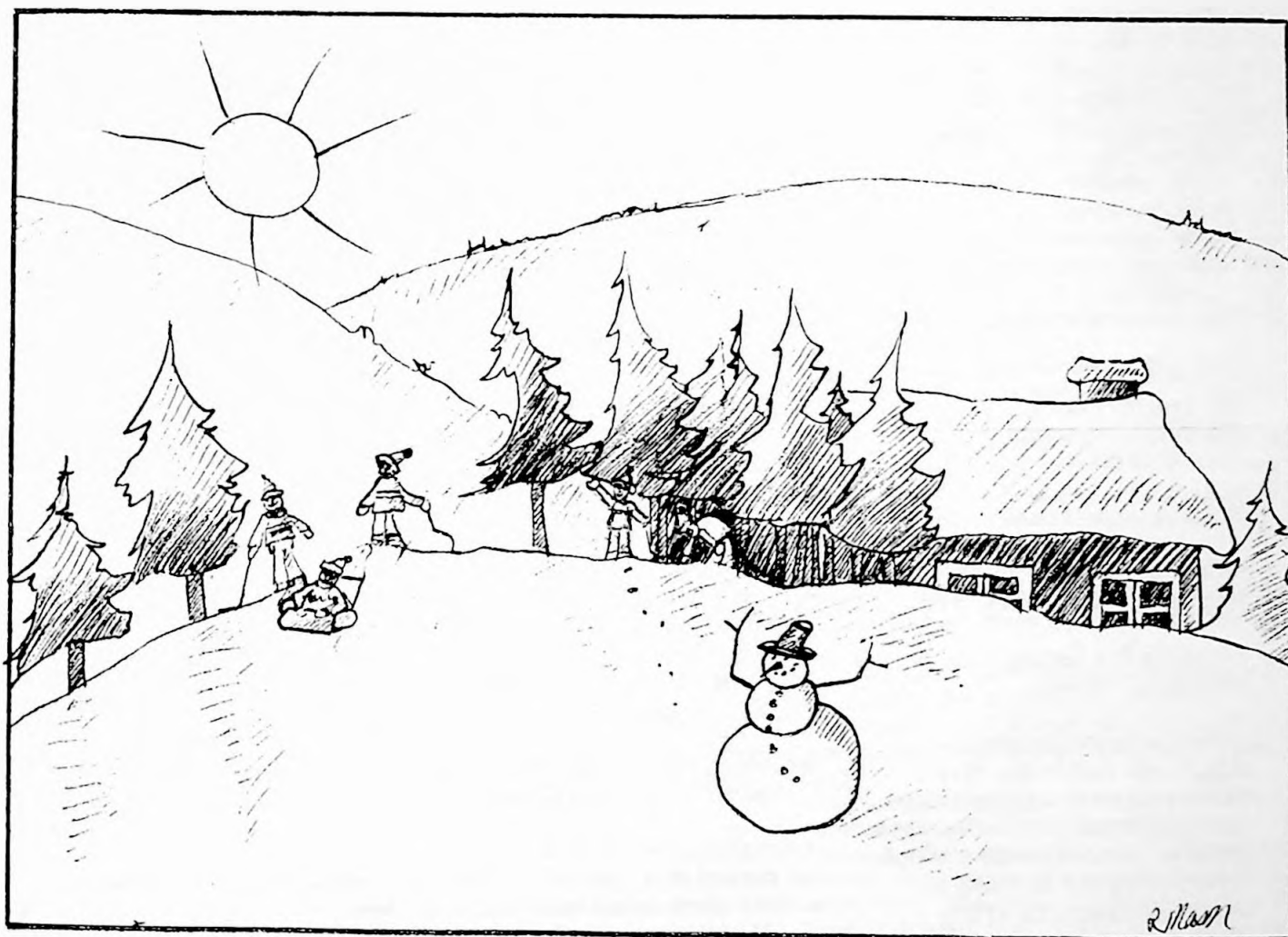


# Ec-Sense



**The Allergy and Environmental Health  
Association of Canada  
Association Allergies Santé et  
Environnement du Canada  
Ottawa**



**Winter 1993-94**

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If your membership has expired or will soon expire and you would like to continue receiving the *Eco-Sense*, YOU could help save us money and energy. Check your mailing label for your expiry date and send your cheque or money order in the amount of \$25.00 (plus donations, if possible) payable to AEHA Ottawa to: AEHA Ottawa Membership Renewal, P.O. Box 33023, Nepean, Ontario K2C 3Y9.

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## President's Message

by Elizabeth Stutt for Chris Brown

Well, here we are getting ready for another year. We hope that you will attain better health and have much happiness in the new year.

Our thanks to Judy Spence for stepping in and pulling this issue of the *Eco-Sense* together for us. Our Newsletter editor, Penny Corbin, has been very ill this past fall with pneumonia and was unable to produce this issue. Our thanks for the excellent work you have been doing with our newsletter, Penny. We are glad to hear that your needed rest is helping with your recovery.

Really needed are members who can help out with various tasks for the Newsletter, such as soliciting advertising and articles (or writing them). If you would like to give Penny a hand with the Spring issue, please give her a call (225-1462).

We hope also that you will consider putting your name forward for the Board of Management or for membership on a committee as we have a number of vacancies this year; please contact our Nomination Committee: Kathy Dickinson (838-1306) or Jim McCulloch (726-1136). All offers will be welcomed.

We look forward to our annual general meeting on February 17. Our guest speakers will be Wendy Riley of Vocational Rehabilitation Services and Denise Kelly of Line 1000. They will tell us about their services and then entertain our questions on how their organizations can accommodate persons with Environmental Sensitivity. There will be no meeting in March. Upcoming meetings in April and May will feature Gary Skillen on Electromagnetic Radiation and Ed Lowans on Healthy Schools.

Our thanks to Christine Drolet for her kindness in allowing our members to view her housing unit for the Environmentally Sensitive in Barrhaven, as part of our 1993 National Annual General Meeting program. Christine has been most gracious in allowing not only our membership, but also the media, interested architects, etc., to tour her home. Thanks to both she and Evan for this valuable contribution.

In October, the Public Awareness Committee participated in The Family Conference, jointly presented by the Ottawa Board of Education, the Parent Preschool Resource Centre and the YM/YWCA. This was a very worthwhile undertaking. We anticipate participating in the Parent Preschool Conference, National Access Awareness Week and Community Day, as well as the Family Conference, in 1994. If you know of other events at which our participation would be advantageous, please let us know. Also, if you would like to help staff our exhibit, please call Kathy Dickinson (838-3106).

The Education Committee (Brian Acres, Cathy Acres, Kathy Dickinson, Madeleine Lapointe, Leslirae Rotor, Judy Spence and Elizabeth Stutt) have been working hard. We made an oral presentation to the Royal Commission on Learning on November 16, 1993; an executive summary and background presentation were also submitted at that time.

The Source Book is being updated using information received from your completed questionnaires. If you have not yet completed yours, please do so as soon as possible. The Source Book will be available at cost to our members at our meetings, or at cost plus postage by mail. There will be a surcharge for non-members. If you have items to add, please let me know.

We wish to thank Stéphane Lecouffe for his vigilance in obtaining wild game—deer—for our freezer. We now have a plentiful supply, so please feel free to call in your order. Please read Stéphane's report in this issue.

We wish to thank Estelle Drolet for housing the wild game freezer for the past couple of years; also thanks for your valued contribution as a dedicated member of our Board. Estelle will be continuing her contribution to our Branch as Book Librarian.

Thanks also to Leslirae Rotor, who after several years of dedicated service to our Board, has decided to step down—we hope only temporarily! She has been an active member of the Education Committee, has represented our concerns on the National Access Awareness Committee (NAAW) and has been Elizabeth's right-hand this past year. You will truly be missed on the Board, Leslirae.

Our thanks also to Daryl Rock, Judy Lux and Virginia Salares, who will not be seeking re-election or will be stepping down because of other commitments. We appreciate Judy's decision to continue her responsibilities as Publicity Chair as a non-board member.

The wild game freezer is now housed at the home of Judy Spence. Details on how to place your orders and arrange pick-up will be found later in this issue.

We will try our Entertainment book fundraising project again next year, so start collecting orders now for Entertainment '95. This should be an easy way to make money for our branch if everyone participates.

Some members have indicated an interest in attending workshops. However, we need a coordinator. Our last coordinator was Penny Corbin (225-1462); please call Penny to find out more about this worthwhile opportunity.

There are lots of opportunities for participation in boards to represent the needs of persons with Environmentally Sensitivity. If you are able to attend day or evening meetings on behalf of the Association, please contact me.

A particular need at present is for as many people as possible to contact Ruth Grier, Ontario Minister of Health. In a recent article about the needs of Marilyn McCleary, "Woman who fights allergies to everything finds OHIP worst foe", *The Ottawa Citizen*, January 2, 1994, Ms Grier indicated that "there is a need for Ontario to address environmental illness" and "other provinces may not have the type of facilities that Ontario has, and may have no choice but to send them [patients] south". We'd like to know what facilities Ms Grier thinks

we have in Ontario which can service our needs. (See "A Plea for Help" later in this issue.)

Our congratulations to Lynda Brooks who after several years recently won on appeal a substantial disability pension from the Ontario Workmen's Compensation Board.


Our get well wishes go out to Barb Bellin. We hope you are on the mend soon.

Also, our condolences are extended to Pat Gorgas

on the recent loss of her father and Linda Phillips on the loss of her mother.

We look forward to hearing how you can serve our Association's needs. Consider what your needs and interests are and how you might work towards achieving them on behalf of our Association.

If we all do a little, it will be amazing how much we can accomplish.



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## Report From Your Organic Meat Committee

### by Stéphane Lecouffe

Dear Fellow Members:

We have had wild game (deer meat) of good quality for several years. I am pleased to serve you and share with you my knowledge of wild game and organically grown meats. Before, road kills not properly bled within fifteen minutes. And not aged to tenderize the meat. Unless you are brought up in the country and trained to treat wild game and meats, the product will not be at its best.

The deer meat after the game warden hands over the meat to our organization. The hides are removed and the scent glands. Then the animal must be washed with vinegar and water to clean the residue of blood. Then the deer meat is taken to cold storage area to age at 4°C. Amino acids break down making meat more tender.

Then our meat inspector and butcher checks meat over. After the meat is cut up and packed with each piece marked, eg. steak, hamburger, etc.

When wild deer is properly treated it does not have a gamey TASTE (strong odor). If the recipe is "Stroganoff" with proper treated meat no one will tell the difference from organic beef. (first misconception).

Second thing to do is cook wild game slowly (eg. roast at 200°F) over a longer period of time, up to six hours (always well done, never rare).

Marinate meats helps meats become more tender for consumption. You can use wine, vinegar, or lemon juice depending on your allergies. You keep this mixture in fridge over night. Also you can bang meat with a meat hammer to aid in tenderizing meats.

Also we have organic grown rabbits in freezer. Start with six and increase with demand. From time rabbits are killed, to being eaten is only three months, very short shelf life. Reason we will start with six.

Baby beef (between veal and beef) is very tender and will be in our freezer by end of January. Ross grows his own feed for his animals, no chemicals or hormones.

And in September-94 organic chickens will be available. Orders will be taken in April, with a 20% deposit as of May 1, 1994.

Ross Hamilton and his Eva grow these animals organically. This means growing his own feed and use only natural fertilizers, no chemicals. (Oats and red clove, green manure, plowed under in fields). To grow animals organically takes more time and effort. eg. chicken organic three or four months versus rapid hormone feed chicken six weeks from egg.

Some of our members have met Ross and Eva at our pot luck dinners. No one has had a reaction to his meats. Also I have been delivering his meats to some of our members for over one year. Again no reactions.

I know some of our members do not wish to be called at home. Linda Phillips will be calling everyone to see if you have an interest in obtaining organic meats. Also she will inquire which types of meats you can eat, rabbit, chicken, organic beef, lamb or deer. The reason

she will do this so as to not repeat asking the same questions each time. Also the meat consumed. If a person eats only chicken and rabbit and the amount. Linda may only have to call every three months or if you need to contact her, first call: 837-2661. She will return your calls at her convenience.

All orders must be reached by Linda Phillips by the third Saturday of each month. This will give our freezer person (Judy Spence) time to get orders ready to be picked up on the first Saturday of each month, the time for pickups will be 1pm to 5pm at Judy and Gerry Spence's: 536 Dovercourt Avenue, McKellar [Maitland exit north, North to Sherbourne Ave. Go two blocks on Sherbourne, turn right at Fraser, north two blocks to Dovercourt. Turn right. It's the stone front split level. (728-5069). Bus route #16.]

Some may wish to buy half a beef. Give Lynda Phillips plenty of notice, so she can get the process rolling, about six weeks to deliver. Also the work on her list of types of meats, plus quantity will help us serve you better.

---

<b>Organic beef</b>	hamburger \$4.25/lb
	medium cuts* \$5.00/lb
	premium cuts† \$6.00/lb
<b>Chicken</b>	\$1.95/lb
<b>Deer</b>	hamburger \$2.00/lb
	medium cuts* \$3.00/lb
	premium cuts† \$3.50/lb
<b>Rabbits</b>	\$3.50/lb

---

\* pot roasts, round steaks, etc.

† sirloin, sirloin tip, filet mignon

---

For those who have a problem eating any meat from a cow, other members should keep them in mind. Although we do not discourage others from trying deer meat. We wish to save for those with special needs (no cow products). Hopefully next year we may add moose meat, lamb and turkey. I am also trying to obtain a source close to my home.

We hope that you will use the meat locker for two reasons. The meats therein are clean chemical-free. The price reported to me by fellow members, buying organic meats at farmers markets, from other sources is higher. Also some of our more sensitive members have a problem from Feed Mill Feeds for chickens. They reacted to it. I gave one of Ross Hamilton's chickens to Suzanne Poulin, no problems.

Always happy to have your feed back, your meat director, Stéphane Lecouffe.

*Editor's note:* For an in-depth review of game meats, the issues, the sources and tips on how to prepare wild game meat, refer to your Spring 1992 issue of *Eco-Sense*. Available on loan from our Book Library.

## Classy Classifieds

### Help Wanted:

Volunteers to liaise with:

- OBE Environmental Advisory Committee
- Women's Environmental Network
- Auto-Free Ottawa
- Pesticide Free Ottawa
- COG -Ottawa Branch

Volunteers to work as:

- Grants and funding researcher
- Business plan and proposal writer
- Researchers for workshop material
- Writers for text &/or manuals creation
- Researchers for the *Eco-Sense*

Call Elizabeth Stutt (825-8388) if you are interested in exploring what jobs, tasks and functions are best suited to your needs.

• Variety show actors, comedians, readers, magicians (like get rid of our sensitivities and allergies, OK?) call Steve Rowat (567-0227) and have more fun than you have had in years. What have you got to lose ... we'll probably forget the bloopers anyways!!! Come and socialize and just get crazy with a bunch of friends for a couple of hours. Let's not disappoint Steve ... 'cause he'll be on MY case if you do.

## Branch News

*or, as Joan Rivers says:*

### GOSSIP, GOSSIP, GOSSIP

• We had such wonderful help from Duane Phillips in this issue. He has impressive computer facilities, the skills and the remarkable patience to have taken articles I faxed him and converted them into text files.

Many thanks to Duane (son) and Henry (Linda's husband, friend, pillar of strength) Phillips who pitched in and made my life easy(ier). Linda, you've brought them up well! or, they preferred to get us off their backs and helping was the fastest way!!

• Volunteers are required so that we can provide members with "witnesses" at meetings they must attend. We find ourselves fighting for rights and benefits at many levels and we can use the support and "witnessing" of meetings. This is not an advocacy program but a supportive "**Witness Protection Program**". Call AEHA to volunteer or to request accompaniment.

• Members needing the support of their association to make their concerns and problems known to their school administration or school board, please feel free to phone the **AEHA Education Committee** and let us know the details and nature of the support you need. We have a school board package prepared and we are working with some schools and school boards to improve the "environment of learning" for our children.

• We'd like your input on **Car Buying Tips**. Recount your recent experiences with auto purchases, repairs and maintenance. What did you look for in a car, what are you dissatisfied with? What advice do you have for fellow members? Cars do have to be changed/repared and we'd like to provide information in the next issue. Name the helpful dealers and the difficult ones too. Sharing information is invaluable in our line of health concerns.

• Is there sufficient demand for the creation of a **support group** or workshop series for **families and friends** of persons with Environmental Sensitivity? We won't know until you phone or write us to let us know. The statistics are scary: 85% of couples with a spouse with a chronic illness or disability divorce. The numbers are even higher for persons with Environmental Sensitivity. We think this is an area where we can be instrumental in getting programs set up if there is sufficient demand by the spouses, partners and children.

• Jim and Bev McCullough have kindly donated one acre of chemical-free agricultural land to us in Dunrobin, to grow our own organic plants and food. We have approached Kanata for funding of our project and to till our soil with their equipment. Peter Bradburn of PBM Landscaping will make some of his light equipment available to us on an as-needed basis. COG will be creating workshops on organic gardening that we will be able to attend.

• We need volunteers to help organize (phone calling is sufficient) **Organic Gardening Workshops** for the public. Canadian Organic Growers (COG), and the Women's Environmental Network (WEN) have expressed interest in joining forces with us to provide the workshops both as fundraisers and to raise public awareness through public education. Tentatively, AEHA is to do the organizing/logistics, COG will do the workshops and WEN will provide volunteers on site.

• Penny Corbin has been researching, writing, selling advertising, editing and publishing the *Eco-Sense* single handedly for the past five years. Please, heed her calls for assistance. You and I alike, need the Newsletter which she produces. It is of such high quality and professionalism. She has invested so much of herself, her time, not to mention lots of bug bucks in hardware and software so that she can produce it so beautifully and efficiently.

She had to pass on publishing this edition because she's been quite sick .... yes, we are all volunteers and we all have sensitivities and the load gets heavier and heavier as we work towards recognition and acceptance by the public ... the reports, the meetings, the forums, the advocacy .... less than 15 of us are carrying the weight of the association on our shoulders.

Penny, we'd like to once more extend to you our gratitude for the (too) heavy a load you have had to bear. I for one am exhausted and frazzled from doing just this one edition.

- It is interesting to note that many of the executive are some of the worst affected by sensitivities. We cough and hack through our meetings. We stop occasionally as a participant goes blue and needs help. We're buzzed and spacey before the end of a meeting ... but we are alive ... vital ... fighting the world ... supporting each other, respecting each other.

- **WEN** (Women's Environmental Network) is supporting the boycott of Procter and Gamble's three chlorinated products: Luv's diapers, Depends and Always sanitary pads. They asked us to join the boycott and we are including a postcard of support for your use, if you so choose.

- Our own Education Committee, lead by **Elizabeth Stutt**, made a presentation to the Ontario Royal Commission on Learning. Commission members wanted proof that the issues we raised were of concern to a sufficiently large number of Ontarians. Hence, another postcard for you to send out. We have enlisted the support of many individuals and associations in the region. The Executive Summary is reprinted in this issue; the complete document is available on request.

- Join us please: offer to do a specific finite task and work at it at the pace you are able to comfortably tolerate. Ask your spouse, your partner, your mom or dad, or friends to volunteer. Ask your local service club, church groups, volunteer groups, at work, your union, your employer to assist with donations of time, effort and/or money. Financial contributions are receipted, as we are a registered charity.

Thanks to the dedication of previous administrations, to the decades of sweat and tears of our members, we are recognized more and more by the public, by the government, by the establishment. Widespread support is required in order to sway legislators, research funding agencies, the medical profession and so on. We are approached by media, by health agencies, school boards and members at large. Growth and recognition begets work and demands. We're really on the brink and we will go far with your increased support. Let's make 1994 count.

- Income tax time is around the corner. We've enclosed disability application forms and a few other information brochures of relevance with this edition. You can phone Revenue Canada and request:

- *Index of Information Circulars*, # 93-2; August 9, 1993.
- *Index to the Interpretation Bulletins*, December 30, 1992.
- *List of Taxation Forms and Publications Available for Use by the Public*, # 93-1; August 9, 1993.
- *Special Release Medical Expenses - After 1985*, # IT-509, March 23, 1989.
- *Income Tax Act: Medical Expenses-After 1985*, # IT-509, October 9, 1987.
- *Income Tax Act Medical Expense and Disability Tax Credits*, # IT-519, March 31, 1989.

See our Spring 1989 issue of *Eco-Sense* for a review

of some income tax issues. Remember to get your prescriptions arranged at the start of the year, keep receipts and records of allowable expenses. Greg Etue of Ottawa Chemists will prepare prescribed vitamin and supplements with appropriate receipts.

*General rule of thumb:* if your doctor prescribes medicines and treatments they are medical expenses. Be sure to check with Revenue Canada publications and District Taxation Officers for interpretations and information.

## CMHC News

- Clean Modular House for Canadians (CMHC). This model house suitable for the hypersensitive will be on display in April on the grounds of Central Mortgage and Housing Corporation, Montreal Road, Ottawa. This home is constructed with building materials and a ventilation system to prevent or reduce air pollution. For public viewing times, call 748-2367.
- *Clean Up Procedures for Molds in Houses*. \$2.00. Call CMHC at 748-2367.
- Any member who feels that their illness may be related to pesticide exposure, please call **Virginia Salares** at 748-2032.

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## A Plea for Help by Linda Phillips

You are probably asking yourselves, "Who is Linda Phillips and why has she been asked to write her story?" My story is probably very similar to that of each and everyone of you. I have allergies, severe food allergies and Environmental Sensitivity, now referred to as multiple chemical sensitivities. I have to admit that when I first entered into the realm of environmental medicine I would have been counted amongst the world's worst sceptics. I used to think that people who said that they were allergic to something did so because they just didn't like it. I am ashamed to admit it, but that was my attitude. **Did I have a lot to learn!**

After becoming more and more ill for many years, while holidaying in Venezuela, I had what the physicians there believed to be a heart attack. Upon returning to Canada, I was investigated by cardiologists who insisted that there was nothing wrong with me and referred me to a psychiatrist. Thus I started into the vicious circle that, I am sure, all E.I. (Environmental Illness) patients are very familiar with. My health continued to deteriorate and I was finally referred to Dr. John Molot by both a cardiologist and a psychologist. Dr. Molot, and then Dr. Joseph Krop in Mississauga, tried testing me for allergies and sensitivities. Because I kept going into shock with the testing, they referred me to the Airedale Allergy Centre in England. This centre is an environmentally clean hospital, especially built for the testing and treatment of allergies and sensitivities.

My stay at the Allergy Centre was educational, but physically it was among the worst experiences of my life. I was initially tested by the scientifically-accepted skin patch method for inhalant allergies. This was followed by six days of fasting, ingesting only reverse osmosis filtered water. I had been told that people who become ill during the fast are almost certainly allergic. I certainly showed signs of being very allergic and in fact I became deathly ill.

The fast was followed by the testing for food allergies. In order to test for food allergies, I was given a single pure food a meal. Before the meal, my vital signs: blood pressure, pulse, temperature and weight were recorded. This was repeated twenty minutes and again an hour after eating. If there was a substantial change in my vital signs it was considered that I was, to some degree, allergic to the food I had just eaten. The physician and staff would then follow up with provocative testing in order to ascertain a neutralizing point. I was amazed to experience reactions being completely stopped when the neutralizing point was reached. I was equally amazed to witness the different reactions people had to the same food. Everybody reacted in their own way. As I said, it was a terrific learning experience for me.

Since my return to Canada, I have found that I have entered a "medical politics" as well as a "political" bees nest. I should have been forewarned by my family physician's response, when I discussed my diagnosis of severe allergies, food allergies and multiple chemical

sensitivities with him. He said, "You don't want to be one of 'those people', do you?" and got up and left. No, I certainly do not want to be one of "those people"! I am just as certain that everyone of "those people" don't want to be either!



I am fairly certain that there is not one E.I. patient out there who has not experienced a very similar response to the diagnosis. Nor can I believe that there is a single E.I. patient who has this illness by choice!

In order to shorten a very long story, I will just say that without the proper facilities to test and treat my condition my health has continued to deteriorate. For the past four years, I have not been able to leave my home without suffering seizures and becoming very ill. I have suffered other severe medical conditions but again, due to the lack of environmentally clean facilities, I have not been able to have these treated either.

In August 1992, while trying to be with my son who was in intensive care, after being catastrophically injured in a motorcycle accident, I severely injured my back while in seizures. I was told by a neurologist to accept the fact that I could not be with my son, accept the fact that I could not be treated in a hospital, and to go home and stay there.

In the early fall of 1993, due to the severe reduction in the sight of my right eye, the seizures and because of

nerve damage in my legs, it was considered that I needed to be carefully examined by a neurologist. In order to do so, I needed to be hospitalized. The Ministry of Health was arranging for an environmentally clean room to be made available for me at the Riverside Hospital. In November, I was notified of the hospital's decision not to accommodate my needs because it was deemed too expensive. My family physician told me that they were trying to "coerce" a neurologist into making a home visit in order to "talk" to me. I have heard nothing further. Dr. Molot and my family physician, Dr. Riddle, have been totally frustrated in their attempts to find medical treatment for me.

Dr. Molot has referred me to the Environmental Health Center at the Tri-City Hospital in Dallas, Texas. OHIP has denied my application for funding for treatment there. They state their refusal is because, *"the illness is not recognized by the Ontario Medical Association ... there is treatment in Ontario ... there is no need for an environmental unit ... and ... the treatment in Dallas is experimental"*. This is somewhat oxymoronic considering that OHIP helped fund my testing and treatment in England four years ago, in order to confirm the diagnosis of allergies and Environmental Sensitivity. They acknowledged at that time that there were no adequate facilities in Ontario, and nothing has changed since then.

My M.P.P., Jean Poirier, wrote to the Minister of Health on my behalf. The response that he received was: *"Care for individuals with environmental sensitivities is a priority in the Ministry of Health.... I sympathize with people who are suffering ... attempts must be made to obtain the assistance that is required."*

At the Minister of Health's request, the Canadian Society for Environmental Medicine has drawn up a list

of requirements for the hospital accommodation and treatment of E.I. patients. Now it appears that the Minister is reluctant to meet with these specialists. She has been quoted as saying that attempts must be made to obtain the assistance that is required, yet there is no evidence of this. She was quoted as saying that care for individuals with Environmental Sensitivity is a priority in the Ministry of Health. What priority? If, indeed, Environmental Sensitivity is a priority, why the lack of any sign of action?

My case may be extreme but my concern is that each and every one of us with Environmental Sensitivity is, to some degree or another, facing the same situation. There are no proper facilities to treat environmental illness or any other illnesses we may be so unfortunate to suffer.

Dr. Molot has advised me that the only way that he sees for us to get the Ministry of Health to acknowledge our illness, or to take our needs seriously, is for us to start a letter-writing campaign. He suggested that we all write to the Minister of Health outlining our situations and our need for environmentally clean medical facilities. I have written on a number of occasions but obviously a single voice is not heard. I am asking for my sake and for the sake of all E.I. sufferers, that you all write to the Minister of Health.

**It is time for our government to acknowledge that we exist, that our needs are not being met, and that our Canadian universal medical care is not available to us! And, it is time for changes so that services are available to us.**

*Editor's Note:* See J.F. MacLennan, M.D., "Medical Update: Guidelines for Hospitalization", *The AEHA Quarterly*, Vol. XV, No. 2 (Summer 1993), pp. 5-6.

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## *Allergy and Environmental Health Association (Ottawa Branch)*

*invites you to attend our*

### *Annual General Meeting*

*followed by presentations on*

### *Vocational Rehabilitation Services by Wendy Riley*

*and*

### *Line 1000 by Denise Kelly*

*Bring your job-related questions for a panel discussion  
following the formal presentations.*

*McNabb Community Centre  
180 Percy Street, Ottawa*

*Thursday, February 17, 1994  
at 7:30 pm*

---

If interested in cooking or alternate grains workshops, call Grace Crout at 725-9477.

If interested in workshops on Cosmetics or Electromagnetic Radiation, contact Elizabeth Stutt at 825-8388.

## *Nomination Committee's Suggested 1994 Slate of Officers*

**President**  
*Elizabeth Stutt*

**Past President**  
*Chris Brown*

**Vice President**  
*Judy Spence*

**Treasurer**  
*Arthur Read*

**Secretary**  
*Evelyn Hadican*

**Members at Large**  
*Kathy Dickinson (1 year)*  
*Stéphane Lecouffe*  
*Jim McCulloch*  
*Linda Phillips*  
(3 vacancies still to fill)

---

## *Dates to remember*

February 10, MESH Ottawa  
Telework Workshop with  
**Barbara Bova**,  
Hintonburg Community  
Centre, 2-4 p.m.

February 24, MESH Ottawa  
meeting with  
**Dr. Trevor Lyons**,  
Hintonburg Community  
Centre, 7:30 p.m.

March, no general meeting  
April 21, **Gary Skillen** on  
Electromagnetic  
Radiation, McNabb  
Community Centre,  
7:30 p.m.

May 19, **Ed Lowans** on  
Healthy Schools

## Telephone Committee Report

by Linda Phillips



For the last couple of years I have been involved in telephoning members of AEHA and reminding you of upcoming meetings, events and association news. Although I have been totally housebound and am at times bedridden, I have found that this is one job that I can do quite efficiently. Not only am I able to help the association, but I find that the contact with other members has been very rewarding and supportive. It has helped to alleviate the feelings of isolation, desperation and utter loneliness. Talking to you has helped me as much as I hope, I have helped you. I would like to say that I am very glad I have met all of you.

I have offered to chair the telephone committee. By doing so, I am increasing my duties and am not

able to call as many people as before. This leaves a gap in my list of phoning people. I am hoping that some of our members who are unable to take on any other AEHA job, might consider becoming a member of my phone committee. We phone once a month and only call the members who have requested telephone contact. I do not want my people to have to phone more than eight people each and I certainly don't want them making long distance calls at their own expense. The phone calls take as little or as long as you wish to make them. If you are interested, just give me a call at 837-2661. I would really appreciate hearing from you.

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## The Effects of Amoebae and Candida in Periodontal Disease by Judy Spence, R.N.

A parasite is an organism which lives upon or within another living organism, at whose expense it obtains some advantage. A pathogen is an organism that produces disease. From the definition of parasite it should be immediately apparent that there can be no non-pathogenic parasite. All parasites are to some extent pathogenic. What remains to be determined is the degree of patho-genicity of any particular parasite. Thus, by definition, there can be no "good" parasites. Medical literature describes Entamoeba (E.) Gingivalis as parasites.

E. Gingivalis are obligate parasites which cannot live freely in the environment, but must depend on a host for survival. They "eat" white blood cells. White blood cells are produced by the body as a defence mechanism, but in this case the body is actually providing the culprit with food.

In the case of successful parasites, the associated diseases are chronic and debilitating. To complete the cycle the parasite must undergo maturation and/or reproduction before being released into the environment to search out a new host. Pets can also play host to numerous parasites (and fungi). Pets should not be allowed to eat off of our dishes because they can either pick up or deposit organisms.

Clean dishes very carefully by using the HOT WASH and HOT DRY cycles in your dishwasher (to kill parasites). If handwashing, soak dishes in a sinkful of hot water (add a couple of kettles of boiling water) to which one capful of bleach is added. E.I. patients can often not tolerate chlorine fumes. If unable to chlorinate, just use boiling water. (The use of Borax or Zephiran or concentrated peroxide powder has not been tested, but the author suggests that they might provide sufficient disinfection.)

Signs and symptoms associated with an infection of the oral cavity by E. Gingivalis frequently include: difficulty in maintaining a clean mouth; heavy plaque formation (which rapidly regenerates after removal); an unpleasant taste; an aware-ness of the gums; gingival bleeding; ulcerations; a garlic-like halitosis; sore, dry itchy eyes; a history of generalized malaise; fatigue; frequent headaches; protracted repetitive influenza-like symptoms (if the infection has been recently contracted).

Night sweats are commonly known to be symptomatic of parasite infections. Dr. Lyons has

studied amoeba throughout the day and night and has observed that there appears to be a diurnal rhythm in which E. Gingivalis is more active when the host is tired or sleeping. Night sweats usually cease after the infection has been eliminated.

There are often direct correlations between generalized health deterioration of patients and the progression of periodontal disease. Following an asymptomatic period, which may represent an incubation stage (periodontal), is an influenza-like illness which is typically severe or repetitive (generalized health).

Rather than returning to normal health, people seem to acclimatize to a diminished state of health which is frequently manifested by undue fatigue and more frequent headaches (generalized health). At this stage, periodontal deterioration may occur, typified by the onset of bleeding and heavier plaque formation (periodontal).

This phase of infection can run a variable course over a number of years, during which patients usually experience good general health but the periodontal condition may worsen. Nearing the terminal phase of periodontal disease, more alveolar bone is lost, the teeth loosen and periodontal abscesses may occur. It is at this phase that the general health of the patient also starts to decline. Some authorities hold that periodontal breakdown is symptomatic of a general decline in health.

Dr. Lyon's own studies suggest that infection with E. Gingivalis precedes the oral and systemic declines. Treatment to eliminate the parasite is usually followed by reversal of signs and symptoms of both oral and general disease. In some instances where there is irreversible disease, although it does not worsen, elimination of the infection may only result in a state of stability.

Candida is a fungus which has two forms: the mould (invasive) phase and the yeast (reproductive) phase. In plaque, it lives on sugar from food, fermenting sugar directly to acid. Candida may cause white areas in the mouth, painful cracks at corners of the mouth, stinging in the gums and painful teeth. Usually, relief of symptoms coincides with elimination of Candida.

The Dallas Environmental Unit, other diagnostic centres and other physicians now report Candida as the only abnormal finding for some patients with environmental illness, undue fatigue and even some types of depression. Recently, the latter has

Table: Preventative Programme

Morning	After Meals/Snacks	Bedtime
Pretreatment rinse (if mouth is sore)	Rinse with water to remove debris	Pretreatment rinse (if mouth is sore)
Preventative paste patted onto GUM line (don't scrub!); spit out excess; rinse in 1 hour. Or, pat MTP onto gums. See MTP section for technique.	Use floss, if necessary, to remove food. Do not "saw" with floss.	Brush TEETH with preventative mouth rinse
	Partials/dentures: remove and wash clean	Partials/dentures: Betadine soak 5 minutes, rinse, then into denture cleanser. Discard Betadine weekly.

Cleanse toothbrush with preventative mouth rinse solution or rub the MTP powder into bristles and leave until next use—"pickles" the germs, killing them, otherwise brush may harbour germs. For the first month, renew your (soft) toothbrush every week. For the second month, renew it every two weeks. Third month onwards, start every month with a new brush.

been shown to be due to Candida toxins interfering with normal brain cell chemistry. Improvement is observed when Candida is eliminated.

The following partial list of conditions, sometimes associated with Candida, is useful in helping to determine if your Candida might be affecting you. However, Candida is NOT the sole cause of these, or any condition. Finding Candida should not exclude other tests or diagnoses: allergy symptoms; some cases of infectious endocarditis, disease of collagen which may include mitral valve prolapse and some types of joint or ligament disorder; digestive system disorders including gas, bloating and diarrhoea; blood poisoning; hair loss; infected nail beds; urinary and reproductive system infections; hormone imbalance; cystic acne; thrush (e.g., diaper rash) Candida infections; zinc deficiency and loss of smell are interrelated as are deficiencies in Iron, Vitamin A, B6, folate and pyridoxine: this could lead to blood disorders, such as a reduction in the white cells that belong to the immune system. In fact, recent research has shown that some of the toxins produced by Candida reduce circulating T-cells from 35 to 50 per cent. Candida can dramatically suppress the immune system, rather than being symptomatic of suppression of immunity. Other symptoms associated with Candida infections include loss of short-term

memory, headaches, hyperactivity in children, sweet cravings, abnormalities in blood sugar, multiple jaw abscesses, suicidal tendencies and the "Drunken Charlie syndrome".

Candida interferes primarily with cell function, rather than cell structure. Most Candida-related disease, while apparently bizarre and unrelated, have disturbance of cell metabolism as a common denominator so they are usually largely reversible.

Taking an antibiotic will not give you Candida. But if you are taking an antibiotic and already have Candida, then the suppression of the other "germs" (which compete with Candida for space and nutrients in your ecosystem) upsets the balance and allows Candida to overgrow and cause a problem.

#### The Preventative Programme:

Reduces Pathogens, Heals Tissues

Before starting on the PROGRAMME, prepare the Modified Torrens Powder (MTP) and Preventative Mouth Rinse:

**Modified Torrens Powder (MTP)** (for tissue conditioning): The formula is one part salt plus six parts baking soda (mix for 5 minutes in a blender to make a fine powder). Put about a teaspoonful of the powder into an egg cup, or similar container. Pat the powder onto all the gum margins using a

saliva wetted finger. Spit out all the excess. Try not to eat, drink or rinse for the next hour. For those on a low sodium diet, use the preventive paste made with Epsom Salts instead of MTP. Use MTP in the morning.

For a sore or painful mouth or gums, a useful mouthwash is 3 teaspoonsful of powder in 4 to 6 ounces of hot water. Rinse gently and keep it in your mouth while it is hot. When it cools, spit it out and take another hot mouthful, etc. Do this as often as brings relief. An alternative is unsweetened tea or coffee. All act as a hot poultice, but the MTP rinse works best. Second best is hot, strong, clear tea.

**Preventative Mouth Rinse** (Anti-plaque Anti-septic): 1% Hydrogen Peroxide is made by diluting 3% peroxide: 1 part Hydrogen Peroxide with 2 parts water makes a 1% solution when fresh. Use about three teaspoonsful to rinse for three minutes. \*NOTE: Hydrogen Peroxide "goes off" slowly after the bottle has been opened. Buy small bottles. Keep the main supply refrigerated. Keep a smaller bottle of 1% in the bathroom. The shelf life, once opened, is so short that when the bottle is half gone it may not need to be diluted as much as at first. It may even be down to 1% by the end of the month. Judge the strength by the fizz! Use at night after brushing.

**Preventative Paste** (a taste alternative to MTP): Mix a few drops of 3% Hydrogen Peroxide with about a teaspoonful of MTP to make a stiff paste. Apply the paste to the gum margins for tissue conditioning. Use your toothbrush, but don't "brush". Spit out the excess.

**Brushing** (Teeth and Gums): Dip the toothbrush into 1% Hydrogen Peroxide and brush the area covered by the brush, redip the brush and brush the next section and so on. After brushing, rinse thoroughly with water, then rinse with the Hydrogen Peroxide. Brush last thing at night. Modified Torens Powder, alone or with Hydrogen Peroxide, should be used in the morning.

**Partials/Dentures:** Use Betadine in a closed container to soak for 5 minutes to kill germs/amoeba/parasites. Rinse thoroughly; then cleanse with your usual denture cleanser. Those allergic to iodine should not use Betadine. Change Betadine solution weekly.


**General Notes** including a quick summary of oral hygiene: After the use of the Hydrogen Peroxide or the MTP, you should try not to eat, drink or rinse for the next hour. During the day, rinse with water after all meals and snacks to remove food debris; use floss if necessary to remove food, but be careful not to hurt the gums.


Don't saw with the floss. Remember that food debris encourages growth of bacteria which cause tooth decay and inflammation of the gums.

Change your toothbrush every week because it becomes infected with the germs from your plaque within two weeks. Continue this until the target germs have been eliminated by treatment. Use a Bass type of brush, for example, the Butler SUB-G (Dr Bass Right Kind). It is soft because the brush should wear out so that you don't! Do not use the rubber tip.

Use MTP in the morning and spit out the excess but do not rinse the residue away. However, after food or beverages always rinse (and swallow) with water to remove food residue. Brush once daily, with Hydrogen Peroxide, before you go to bed. After brushing, rinse out the foam with water; then rinse with 1% Hydrogen Peroxide. Spit out the excess but do not rinse the residue away.

REFERENCE: Trevor Lyons and Eleanor Stanfield, *An Introduction to Protozoa and Fungi in Periodontal Infections: A Manual of Microbiological Diagnosis and Nonsurgical Treatment* (Ottawa: 1989), ISBN 0-969.3950-0-0. Copies are available for sale by contacting Dr. Lyons directly at (613) 236-2233.





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# Multiple Allergy Revue

## A CALL FOR

## ACTS!

- WHY:** To socialize, express, relax, and enjoy
- WHAT:** Singing, poetry, comedy, and skits about life with multiple allergy
- WHO:** YOU!! Come on out! All performers will be people medically diagnosed with MCS, EI, MAS, or the like, or otherwise demonstrably afflicted with multiple environmental allergies (chemicals, foods, or both)
- WHERE:** The GREEN DOOR Restaurant, 200 Main Street  
(restaurant will be rented for this function)
- WHEN:** SUNDAY, APRIL 10 Doors Open at 7:30 P.M.  
Show 8-10 P.M.

**Contact:** Steve Rowat, stage show & performers. 567-0227  
Judy Spence, logistics & publicity. 728-5069

### NOTES:

1. SPECIAL CONDITION: NO PERFUME OR TOBACCO. Hooray! (Any person bringing in a moderately strong scent of any sort may be asked to leave.)
2. Audience and volunteers for organizing and set-up can include other interested persons (spouses, friends, general public). All are welcome. Small door charge (two or three dollars) will pay for the hall & performers' expenses.
3. It's possible that transportation can be made available in one or more ELECTRIC VANS from the University of Ottawa's experimental program. Vans will be checked in the near future for passenger compartment chemicals (external emissions are minimal). Anyone interested in being driven in such a Van please call Judy. Especially, call soon if you think you might *only* attend if such a Van is available. Anyone willing to drive the Van please call.
4. We remind you again (in case your short-term memory is fritzing out from the smell of this newsletter) that there *will* be a *great* show if enough of you help us put it on!
5. Steve has written a humorous "park bench male & female" skit for the show & is looking for creative volunteers (with or without prior acting experience) to work with him & the script. Guaranteed no physically compromising positions. Anyone disappointed by the last sentence is especially welcome to apply. One male and one female lead; optional bit parts for traffic.



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## Multiple Chemical Sensitivities (MCS) Conference

by Judy Spence, R.N.

Finally, for those federal public service employees suffering from MCS, you no longer have to suffer alone, in silence.

The Public Service Alliance of Canada held an extremely successful three-day conference which was attended by more than 350 participants—component representatives and Health and Safety Officers. They were introduced to MCS, learned about signs and symptoms, how to reduce exposure in order to avoid dangers and finally what to do from a union point-of-view when fellow employees develop sensitivities.

Speakers pointed out that MCS has a devastating impact on patients and their families—both emotionally and financially. There are few benefits being paid out because insurance companies and government departments will not accept a functional diagnosis but insist on waiting for a definitive medical definition.

As yet, there is no single diagnostic test, only diagnosis based on anecdotal records. Symptoms manifest themselves differently from one patient to another and treatments vary widely as well. Despair is felt by the tens of thousands of sufferers because there has been pathetically little research funding made available to solve the mystery of this disorder.

The conference speakers reaffirmed the conclusions put forth at the 1990 CMHC conference on the environment—that until there are precise diagnostic tests, eligibility for benefits or compensation should be based on an individual's ability to function.

Too often patients become financially destitute, lose their homes and have creditors after them; many are forced to go on Welfare, having lost everything they worked and saved for. Most are denied benefits and must fight legal battles for benefit entitlements and have to go on Welfare just to survive. Treatments are expensive and too few people can afford them, especially when on Welfare or fighting for eligibility recognition and payment of health benefits.

MCS is so debilitating that many sufferers cannot work. Others potentially could work if only there was employment available in areas which would not provoke their severe reactions.

It was pointed out by Dr. Tom Kosatski, MCS researcher at McGill University, that the Gold Standard levels for air quality are set to avoid only severe acute toxicity or cancer and that they are "irrelevant norms when applied to your situation [MCS]". Hence many more will become sick (canaries) if improved standards are not legislated.

Speakers at this conference were medical researchers, benefits experts, lawyers, advocates and leaders of the union movement, such as Mr. Daryl Bean, President of PSAC.

The highlight of the conference was the participation of four very courageous MCS victims who gave

personal testimonials about their own illness and the impact that it has had on their lives. It was very cathartic to see an audience of over 350 healthy persons listening so attentively, empathetically and quite openly to the experiences being recounted to them.

Several had experienced workplaces which caused fellow workers to develop symptoms described by the experts and in the MCS testimonials. ALL wanted to know what to do to correct workplace health and safety issues that were causing coworkers' distress.

This PSAC conference on MCS was the first one sponsored by a Canadian union. Ms Louise Hall is to be congratulated for her organization of this conference. She is an Occupational Health Nurse who in the early 1980s pushed for the ban on smoking in the PSAC office, initiated the Fitness Breaks concept at the 1983 conference, initiated health awareness campaigns, worked to have smoking banned in federal government buildings and worked diligently to bring the *Non Smokers' Health Act* into existence in the 1990s.

Under Louise's exacting instructions, the conference hall was made as barrier-free as possible. She and her staff worked with the conference centre's air quality engineer to assure that the conference halls and rooms were ventilated with 100% fresh air. All floors, equipment, tables and chairs were washed by hand several times with a baking soda solution to reduce VOC emissions. Separate washrooms were designated for those with MCS and these were meticulously prepared: toilets, floors, sinks and walls were scrubbed with baking soda and noxious soaps and deodorizers were removed without a trace.

Participants were cautioned not to wear perfume or aftershave and the entire conference floor was designated as non-smoking. Coffee and foods were served away from meeting areas to avoid any allergic reactions.

St. John's Ambulance staff and vehicles were always on site. An information and instruction protocol form was made available to any allergic or MCS participant to fill out in case emergency interventions were required. The extremely conscientious efforts made by Ms Hall and her staff aided MCS participants and served as a role model for the healthy.

PSAC is dedicated to the education of its members and employers, and to a continued active participation on labour/government legislative review boards on this critical issue of the 21st century. Mr. Daryl Bean, President of PSAC, pledged to continue promoting the recognition of and protection for union members suffering from MCS.

*They will no longer suffer alone or in silence.*



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Kraft General Foods Canada advises that Post Bran Flakes cereal in the 400 g box, code number 306022 may contain nuts.

## The Environment of Learning

Executive Summary of a presentation by Elizabeth Stutt on behalf of the Allergy and Environmental Health Association and Parents for Education Without Pollution to the Ontario Royal Commission on Learning, Ottawa, November 16, 1993

"The Environment of Learning" must be addressed in order to ensure that our children are able to meet their potential. Indoor air quality for children in schools needs to be significantly improved.

People with Environmental Sensitivity are those whose health is compromised at levels that are presently considered to be acceptable for the general population. Unfortunately, indoor air quality in schools is currently based on standards for the average adult population. These are clearly inadequate for children with Environmental Sensitivity and probably for the general population of school children as well since children are far more sensitive than adults to contaminants. Many school days are presently missed because of inadequate air quality in our schools. By failing to provide good air quality in our schools, some children are facing barriers to equal access to programs and services and many are failing to learn to their potential.

Some of the issues which must be addressed in our schools to ensure appropriate in-door air quality, include the following:

- smoking and scented products
- bactericides, fungicides, herbicides, pesticides, termiticides
- ventilation systems and operable windows
- lighting/proximity to power line corridors
- volatile organic compounds in
  - building materials and furniture
  - maintenance and renovation practices
  - cleaning products

- carpets
- off-gassing period for new construction and renovation projects
- portables and portapac classrooms

It is essential that the Ministry and all school boards demonstrate a commitment to our children's health and well-being. This will have a significant effect on our children's ability to learn and will demonstrate, in a tangible way, the Ministry's active commitment to the environment and the need to respect the planet and other people.

The ministries of Community and Social Services, Housing and Labour are presently addressing issues facing persons with Environmental Sensitivity. We particularly commend this New Democratic government for its proposed Environmental Bill of Rights and its Ministry of Health's planned research and treatment centre for persons with Environmental Sensitivity.

The health and educational opportunities of our children necessitate immediate action by the Ontario Ministry of Education and Training, which has a duty of care to enact enforceable legislation to ensure that the rights of all children under their jurisdiction are protected.

The provision of seats for the Allergy and Environmental Health Association on the provincial Special Education Advisory Committee, the Ontario Parent Council and other relevant committees will ensure an effective communication link with the Ontario Ministry of Education and Training.

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Royal Commission on Learning, 101 Bloor Street West, 13th Floor, Toronto, Ontario M5S 1P7, Telephone (416) 325-2707, Fax (416) 325-2956, Toll-free 1-800-565-0861

Dear Commissioners,

I am writing to express my concern about the current levels of indoor air pollution that are considered acceptable in schools today. I or my family members suffer from Environmental Sensitivity and know first hand the health problems and barriers to learning when exposed to chemical and natural sources of indoor air contamination. I would urge you to do all in your power to ensure that enforceable legislation is passed setting down a policy of accommodating the needs of students and staff with Environmental Sensitivity and improving the overall air quality in Ontario schools. Sincerely,

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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You haven't listened to my concerns about your 'sanitary' products. Until you stop bleaching them with chlorine gas/chlorine compounds and reduce waste, I will not buy Always, Pampers/Luvs or Attends. Yours sincerely,

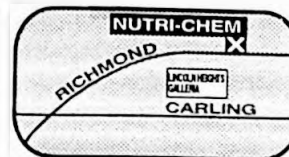
Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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housekeeping. A Dust Mite's favourite food is shed scales of human skin (i.e., dander, dandruff). Mattresses, pillows and some stuffed furniture are the favourite breeding grounds for mites within your home. Your bed provides an ideal environment for mites to grow. As you lie in your bed all night dust from within your mattress and pillows is pushed out into the air you breathe. For the allergic person this exposure each night is dynamite and can result in chronic discomfort.

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Enclose your mattress, boxspring and pillow in Allergen Tight™ Slipcovers.

better, more allergy free sleep and your immune system will have time to rest and regain its strength. Allergen Tight slipcovers are specially made by Allergy Relief Distributors and can be ordered directly by mail or purchased locally through a selected dealer. Allergen tight slipcovers are backed by a 2-year warranty and a 60-day money back guarantee of satisfaction. More information can be obtained from your doctor.